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PTO/SB/21 (04-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

| | | | |
|---|----------------------|---------------------------|--------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/801,213 | |
| | Filing Date | March 15, 2004 | |
| | First Named Inventor | BRENNEMAN, William et al. | |
| | Art Unit | | |
| | Examiner Name | | |
| Total Number of Pages in This Submission | 4 | Attorney Docket Number | 6113-000027/US/CPA |

ENCLOSURES (check all that apply)

| | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard Statement under 37 CFR 3.73(b) and Power of Attorney |
| Remarks The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed. | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | | | |
|-------------------------|----------------------------------|---------------|-------------------|----------|--------|
| Firm or Individual name | Harness, Dickey & Pierce, P.L.C. | Attorney Name | Bryan K. Wheelock | Reg. No. | 31,441 |
| Signature | | | | | |
| Date | May 5, 2006 | | | | |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

| | | | |
|-----------------------|-------------------|------------------------|-----------------|
| Typed or printed name | Bryan K. Wheelock | Express Mail Label No. | EV 726255259 US |
| Signature | | Date | May 5, 2006 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



| | | |
|---|------------------------|---------------------------|
| REVOCATION OF POWER OF ATTORNEY and APPOINTMENT OF NEW POWER OF ATTORNEY | Application Number | 10/801213 |
| | Filing Date | March 15, 2004 |
| | First Named Inventor | BRENNEMAN, William et al. |
| | Art Unit | |
| | Examiner Name | |
| | Attorney Docket Number | 6113-000027/US/CPA |

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number : 28997

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 28997

OR

| | | | | | |
|--|-------------------------------|-------|--------------|-----|-------|
| <input type="checkbox"/> Firm or Individual Name | Harness, Dickey & Pierce, PLC | | | | |
| Address | 7700 Bonhomme, Suite 400 | | | | |
| Address | | | | | |
| City | St. Louis, | | | | |
| Country | USA | State | MO | ZIP | 63105 |
| Telephone | 314-726-7500 | Fax | 314-726-7501 | | |

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

| | |
|---|--|
| SIGNATURE of Applicant or Assignee of Record | |
| Name | Theodore A. Zimmermann, Assistant Secretary |
| Signature | |
| Date | 4/17/06 |
| Telephone | 618-258-3451 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/801213
Filing Date: March 15, 2004
Applicant: BRENNEMAN, William et al.
Group Art Unit:
Examiner:
Title: Laser Ablation Resistant Copper Foil
Attorney Docket: 6113-000027/US/CPA

Director of the United States Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

STATEMENT UNDER 37 CFR 3.73(b) AND POWER OF ATTORNEY

Under 37 C.F.R. § 3.73(b), the undersigned hereby states that the below-named Assignee is an assignee in the above-identified Application:

Assignee: Olin Corporation

The documentary evidence of a chain of title from the original owner to the Assignee is provided in the Assignment Document(s):

- ☐ filed herewith,
☒ previously filed,

Reel No. 015123, Frame No. 0212.

POWER OF ATTORNEY

I hereby appoint each practitioner at Customer No. 28997 of Harness, Dickey & Pierce, P.L.C., my attorney with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

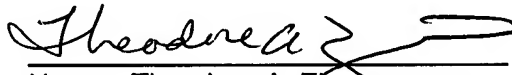
CORRESPONDENCE ADDRESS

I request the Patent and Trademark Office to direct all correspondence and telephone calls relative to this application to Customer No. 28997, Harness, Dickey & Pierce, P.L.C., 7700 Bonhomme, Suite 400, St. Louis, Missouri (314) 726-7500.

The undersigned, whose title is supplied below, is empowered to sign this certificate on behalf of the assignee.

OLIN CORPORATION

Date: 4/17/06


Name: Theodore A. Zimmermann
Title: Assistant Secretary